

**From:** Collins, Francis (NIH/NHGRI) [E]  
**Sent:** Mon, 9 Jan 2023 17:56:46 +0000  
**To:** Jeremy Farrar  
**Cc:** Eiss, Robert (NIH/FIC) [E]; Teresa Miller de Vega  
**Subject:** RE: HIROs

Wonderful news!! She will have big shoes to fill. Thanks, Jeremy.

Francis

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**From:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Sent:** Monday, January 9, 2023 12:45 PM  
**To:** Collins, Francis (NIH/NHGRI) [E] <francis.collins@nih.gov>  
**Cc:** Eiss, Robert (NIH/FIC) [E] <eissr@mail.nih.gov>; Teresa Miller de Vega <T.MillerdeVega@wellcome.org>  
**Subject:** [EXTERNAL] Re: HIROs

Happy New Year.

I have been in touch with Glenda who is delighted to take this on from 2024. We'll work out how to set this up for April 2023...

Best wishes Jeremy

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**From:** Collins, Francis (NIH/NHGRI) [E] <francis.collins@nih.gov>  
**Date:** Thursday, 22 December 2022 at 14:17  
**To:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Cc:** Eiss, Robert (NIH/FIC) [E] <eissr@mail.nih.gov>, Teresa Miller de Vega <T.MillerdeVega@wellcome.org>  
**Subject:** RE: HIROs

Hey there Jeremy,

Thanks for your note – sending you also best wishes for Christmas and New Year's.

To be honest, I have a mixed reaction to your proposal of Tom Kariuki. First of all, I like Tom a lot and he has done some great things in Africa. And I like the idea of having the next HIROs chair from the global South. But HIROs is primarily made up of funders of research, and Tom's role has been different. His current demanding responsibilities in launching a new organization, (b)(6) and trusted acceptance among African government and peer organizations might make it hard for him to focus on HIROs. There is also the troubling story of what happened at AAS.

As an alternative that I think would fit better, what about approaching Glenda Gray? As a highly respected leader from the global South, and someone well known to HIROs members, I think she would be terrific in this role. She was reappointed for a five-year term at SA-MRC in 2019.

All the best, Francis

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**From:** Jeremy Farrar <[J.Farrar@wellcome.org](mailto:J.Farrar@wellcome.org)>  
**Sent:** Wednesday, December 21, 2022 5:36 AM  
**To:** Collins, Francis (NIH/NHGRI) [E] <[francis.collins@nih.gov](mailto:francis.collins@nih.gov)>  
**Cc:** Eiss, Robert (NIH/FIC) [E] <[eissr@mail.nih.gov](mailto:eissr@mail.nih.gov)>; Teresa Miller de Vega <[T.MillerdeVega@wellcome.org](mailto:T.MillerdeVega@wellcome.org)>  
**Subject:** [EXTERNAL] HIROs

Francis

Very best wishes for Christmas and the New Year! 2023 will be a year of transitions!

I met with the MRC Secretariat who support the HIROs Group yesterday. A thought to run by you.

I will be at HIROs at NIH in April. A thought to who might chair HIROs next. What about if we ask Tom Kariuki? The team at NIH, at Wellcome and MRC will continue to provide support I am sure, and I think it would be great if Tom were willing to do it for say the next three years.

What do you think? I did not want to approach Tom without your thoughts.

Very best wishes Jeremy

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**From:** Jeremy Farrar  
**Sent:** Thu, 22 Dec 2022 14:20:43 +0000  
**To:** Collins, Francis (NIH/NHGRI) [E]  
**Cc:** Eiss, Robert (NIH/FIC) [E]; Teresa Miller de Vega  
**Subject:** [EXTERNAL] Re: HIROs

Thanks Francis – good to know your thoughts. The message I had was that (b)(6)  
(b)(6) – let me double check that.

---

**From:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>  
**Date:** Thursday, 22 December 2022 at 14:17  
**To:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Cc:** Robert Eiss <eissr@mail.nih.gov>, Teresa Miller de Vega <T.MillerdeVega@wellcome.org>  
**Subject:** RE: HIROs

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All the best, Francis

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**To:** Collins, Francis (NIH/NHGRI) [E] <francis.collins@nih.gov>  
**Cc:** Eiss, Robert (NIH/FIC) [E] <eissr@mail.nih.gov>; Teresa Miller de Vega <T.MillerdeVega@wellcome.org>  
**Subject:** [EXTERNAL] HIROs

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**From:** Jeremy Farrar  
**Sent:** Mon, 19 Dec 2022 17:32:07 +0000  
**To:** Michael Dunn; Collins, Francis (NIH/NHGRI) [E]  
**Subject:** [EXTERNAL] African Genomes H3Africa and beyond

Francis

Thank you for your note.

Very best wishes for Christmas and the New Year!

Michael was at the recent American Society of Human Genetics and heard your talk, inspiring as always, and wanted to follow up on the plans for the African Genomes Initiative. Michael will also be at the International Congress in Cape Town in February 2023. Michael and Wellcome very keen to remain engaged on this, building off the H3Africa work with NIH.

Will you be in Cape Town? Great if you could connect with Michael in the New Year – with very best wishes Jeremy

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**From:** Jeremy Farrar  
**Sent:** Sun, 18 Dec 2022 19:05:00 +0000  
**To:** Collins, Francis (NIH/NHGRI) [E]  
**Subject:** [EXTERNAL] Re: News

Thank you! So very kind of you to take the time to write Francis, very much appreciated, it means a lot!.

A daunting task at WHO! Keep in touch and always available if I can help and very much look forward to working with you even from the new role! It really has been amazing and such a pleasure working with you over the last few years, amazing! Huge respect. You made such a difference, to so many people in ways even you probably don't even know!. Let's keep pushing on and forward! So much to be done...

Have a peaceful and I hope properly relaxing Christmas festive holidays and the New Year – catch up early in 2023, best wishes Jeremy

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**From:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>  
**Date:** Monday, 12 December 2022 at 17:18  
**To:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Subject:** RE: News

Hey Jeremy,

Wow! This is indeed stunning news, but I will keep it to myself until tomorrow. Tedros is truly lucky to have recruited you – and I wish you all the best in trying to steer the somewhat lumbering WHO apparatus in a direction that can do some real good. It will be wonderful to have you there, though your departure from Wellcome will leave a HUGE gap.

More at some point when there's time. Meanwhile, congratulations and best wishes!!!

Francis

P.S. Maybe now you can fix GISAID. 😊

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**From:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Sent:** Monday, December 12, 2022 12:09 PM  
**To:** Collins, Francis (NIH/NHGRI) [E] <francis.collins@nih.gov>  
**Subject:** [EXTERNAL] FW: News

Dear Francis

I hope you are sitting down, and all is I hope you are well.

In strictest confidence until 10am GMT Tuesday, but I wanted to let you know in person.

Some news, I wanted to share before the public announcement

- I have been offered and have accepted to become the Chief Scientist at the World Health Organisation.

- I will leave Wellcome about the end of (b)(6) 2023 and start at WHO about the start of (b)(6) 2023

- Wellcome will have an Interim Director - Paul Schreier the current Chief Operating Officer - until my successor is found, a very stable transition, a little earlier than expected but it was always going to happen at some point before September 2023

- The announcement from WHO and Wellcome will be on Tuesday at 11am CET/10am GMT - confidential until then

A decision laced with very real trepidation!

- It has all happened very quickly

- Tedros started his second 5 year term in May 2022, and with a number of senior people inevitably leaving and he is keen to make the announcement of the new team, this will be the first of the announcements

- It has been a very difficult decision, (b)(6) in a very complex political and health environment, but in the end, WHO needs science to be central and there are many things only the WHO can do, if I can help move it forward a few degrees, that may make a small difference!

Thank you as always!! Keep in touch, and hope to speak and see you soon .. I look forward to working with you in our new roles!

Please confidential until 11amCET/10am GMT Tuesday ...

Very best wishes Jeremy

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**From:** Jeremy Farrar  
**Sent:** Wed, 10 Aug 2022 16:41:31 +0000  
**To:** Collins, Francis (NIH/NHGRI) [E]  
**Subject:** [EXTERNAL] Re: Anti-Racism Evaluation  
**Attachments:** Wellcome Trust\_Media Release\_Anti-racism programme evaluation\_DRAFT[8][2][2][1][1].pdf, Internal Statement JF Wellcome[2][1][2][1][1].pdf

**PLEASE DELETE EARLIER EMAIL – and use this one**

Francis

It gives me no pleasure to share this with you, but I knew you would want to see it. Please excuse the short note.

The note below is self- explanatory and the attachments are

- The internal statement
- The Press release
- The link to the report etc

We are sharing this in externally on Wednesday having shared it with staff at Wellcome on Tuesday.

As you can imagine this is extraordinarily difficult most importantly for those who have experienced the impact of this. But I do hope that by finally facing up to these issues, within Wellcome and thereby also in the external sector, we can help bring about the radical change that is urgently needed.

These are incredibly challenging issues to confront, but until one accepts we must confront them, and do so in an open, transparent way, we will make no real progress - no matter hard that is at every level when going through it. I'll share these message as examples from individuals outside Wellcome. It is messages like this which in tough times and on tough issues do make a difference. Of course there will be others, positive, neutral and negative - but with the regret, is also a determination to face up to the issue, without that racism will remain endemic, corrosive and pervasive, whether acknowledged or not.

“ This is the beginning of a difficult journey but you are making a difference which others will follow.”

“ Thank you for sharing this. It is a tough read and clearly there is a lot to do. I commend Wellcome for making this so open and for continuing to push for change whilst recognising how much still needs to be achieved. I would like to hear more and know that many other scientific organisations and funders have a lot to learn.”

“ Thank you for your full transparency in sharing the process, findings and path forward on this critically important matter. This report will not only help Wellcome, but it is an humble reminder of how we must all ensure we are prioritizing these principles and actions.”



<https://wellcome.org/news/update-wellcomes-anti-racism-programme>

With best wishes as always Jeremy

## **FINAL EMAIL TO EXTERNAL STAKEHOLDERS**

(grant holders and those who have signed up to our newsletter via our website)

### **Update on Wellcome's anti-racism programme**

Two years ago, Wellcome made a statement recognising that we have perpetuated racism, and made a commitment to becoming an anti-racist organisation. We committed to developing anti-racist principles and an anti-racist programme, and to an external evaluation of our progress.

This evaluation of our work to become an anti-racist funder and employer has now reported. It has found that Wellcome is still an institutionally racist organisation, and that we have yet to act on this with the urgency required. I am sharing this report with you today [add link from website]. Wellcome Collection, and our investments team and portfolio, were not in scope.

While the evaluation found some progress, such as improvements in the racial diversity of our workforce and some positive behavioural and practice shifts, it reached a clear conclusion that we continue to fall short of our commitment to anti-racism, both as a funder and as an employer.

As Director of Wellcome, I accept this. I apologise for the actions and inactions that have caused this, and for the pain and disappointment it has led to.

The evaluation includes some descriptions of unacceptable racist behaviours, and reading about these may be hurtful to those who have experienced them. This lived experience provides insights that will advance and enhance our anti-racism work.

I am grateful for the feedback that our grant-holders, our staff and our advisers have given us through this evaluation, and in our broader anti-racism work, especially given the emotional burden involved in providing it.

Today, I am announcing further actions to advance anti-racism, which speak to our determination to do better.

As a charitable foundation that will spend at least £16 billion over the next decade on science to solve the urgent health challenges facing everyone, we know that Wellcome has great power. We have done too little to use this power to counter racial inequity in research.

Our next actions in addressing inequity in our research funding will be to introduce two measures in the next year:

- A set of positive action principles applied to funding decision-making processes. These will ensure that when applications are similar in merit, we favour those which add to the diversity of the pool of people we support. We believe that a consistent and transparent approach to this will be important both to fairness and equity, and to encouraging a more diverse group of people to apply for our funding. We will be exploring how best to achieve this.
- A dedicated stream of funding available exclusively to researchers who are Black and people of colour, targeted at the career stages where this will have the greatest benefits for diversity.

We will be announcing more detail about each of these measures over the coming months, as we develop the mechanisms by which they will be implemented. If there are to be any changes to our application processes, we will advise grant seekers in advance.

We will also be setting clear expectations that the institutions we fund should take action to increase the numbers of people of colour embarking on and remaining in research careers. We know that we already work with many of you, and your institutions, on EDI and antiracism and we want those positive and constructive relationships to continue.

We are also announcing today that Wellcome will appoint a new member of the Executive Leadership Team, reporting to the Director, with responsibility for leading Wellcome's equity, diversity and inclusion work, including our specific focus on anti-racism. The role will help us to fully embed inclusive practices across the organisation and its work. It does not alter the responsibility of each ELT member to act on anti-racism and EDI more broadly: rather, a key purpose of the role is to support them, challenge them, and hold them to account, as a peer with specialist expertise and experience. As our strategic ambitions have developed over the year, it has become clear to me that we will not be successful in delivering them without this additional emphasis.

We have already made some important changes to governance and accountability for the anti-racism initiatives, through an equity, diversity and inclusion committee with a direct reporting line to the Board. This will build on our [Diversity, Equity and Inclusion strategy](#), published in 2021, which sets out our goals for becoming a more inclusive employer and funder.

Other actions include a programme to educate ourselves about the nature and impact of racist micro-aggressions, and equipping ourselves to challenge them, so that we can create the truly zero tolerance approach to racism we have long professed but have failed fully to implement. The term 'microaggressions' is misleading, as these acts are not minor and their impact is often devastating. I use the term here as it is used in the report.

Our work on anti-racism is core to who we are, and to the way we deliver our mission. We must reflect it in our behaviour, in our processes, and across all our work. We want everyone working at, and funded by, Wellcome to be treated equitably so they can thrive, progress and flourish as we work together to reach our mission.

If you need to speak to someone in relation to this news, you can contact me directly or Wellcome here: [research.update@wellcome.org](mailto:research.update@wellcome.org) or via your usual contact.

**Best wishes Jeremy**

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**DRAFT**

**Media Release**

**Immediate release: 1130 BST Wednesday 10<sup>th</sup> August**

**‘Insufficient progress’ on anti-racism at Wellcome, evaluation finds**

- Funder recognised in 2020 that it had perpetuated racism.
- Wellcome accepts evaluation finding that it has not done enough to address this and is still an institutionally racist organisation.
- Positive action principles to be applied to research funding decisions, so that when applications have similar merit Wellcome favours those which broaden diversity.
- Dedicated funding stream to be introduced for researchers who are Black and people of colour.
- New equity, diversity and inclusion role to be created at executive level.

An evaluation of progress on anti-racism work at Wellcome has found insufficient action on ambitions the funder set out two years ago.

In June 2020, Wellcome publicly recognised that it had perpetuated racism, acknowledging that there is structural racism within Wellcome and the wider research system.

Wellcome pledged to become an anti-racist organisation, with a programme of work including the creation of anti-racist principles and an anti-racist toolkit, anti-racism training for staff, and an external evaluation of progress as a research funder and employer.

This evaluation of Wellcome’s anti-racism programme has now reported [\[INSERT LINK\]](#) and was shared with staff on Tuesday. It finds that Wellcome is still an institutionally racist organisation.

While the evaluation finds “some positive behavioural and practice shifts” it reaches a clear conclusion that “there has been insufficient action taken to allow this commitment to take root”. It highlights evidence of microaggressions and other racist behaviours experienced by staff and grant-holders.

Wellcome is today announcing further anti-racism actions.

These include a firm commitment to apply positive action principles to funding decisions, so that when applications are of similar merit Wellcome will favour those which broaden the diversity of the pool of people it supports. This will come into effect by September 2023.

**Dr Jeremy Farrar, director of Wellcome said:**

“Wellcome is still doing too little to use its power and influence to counter racism. We have fallen short of commitments made to colleagues and to the research community. As a consequence of us not doing more and not acting sooner, Wellcome remains an institutionally racist organisation.

“Wellcome has played and continues to play a role in sustaining racism both in its own operations and in the wider research sector. I am sorry for the actions and inactions behind this, and the hurt and disappointment these have caused.

“It’s clear that unacceptable behaviour still exists at Wellcome. The leadership team, like so many of our colleagues at Wellcome, are determined to change this. We will do better.”

## New action on anti-racism

The new actions Wellcome is announcing to drive greater progress against anti-racism are:

- **Positive action principles** to be applied to Wellcome's funding decision-making process. These will ensure that when applications are similar in merit, Wellcome will favour those which add to the diversity of the pool of people it supports.
- **Dedicated funding stream** for researchers who are Black and people of colour, targeted at the career stages where this will have the greatest benefits for diversity.
- **New equity, diversity and inclusion role at executive-level**, reporting to the director, to lead on Wellcome's internal and external work on equity, diversity and inclusion, including a specific focus on anti-racism. This role will implement and extend Wellcome's existing diversity and inclusion strategy, launched in 2021, ensuring that it is embedded across the organisation and its work.

Each of these measures addresses key recommendations of the evaluation which Wellcome has agreed to accept and begin to implement as soon as possible. Detail about these approaches will be determined over the coming months, and all will be implemented by September 2023.

### Dr Farrar continued:

"Our existing approaches to grant funding are not delivering equity. We're now clear that we won't be successful in improving equity in our research funding, and thereby structural racism in the research sector, without taking positive action.

"The question remaining for us is not whether we do this, but the details of how we do it. We are now focusing on these implementation questions, engaging and listening to those with lived experience and to our partners in the sector as we do so.

"We recognise these measures will not be the only changes needed but I hope they speak to Wellcome's determination and renewed commitment to do better."

The evaluation report makes a number of additional recommendations that Wellcome will review against existing plans, and will respond to in the coming months.

Wellcome will also set clear expectations that the institutions it funds should take action to increase the numbers of people of colour embarking on, remaining and thriving in their research careers.

## Evaluation findings

The external evaluation draws on focus group interviews with staff and grant-holders, surveys, and a review of existing data Wellcome collected on race. Wellcome Collection, the free museum and library, and Wellcome's in-house investment team and portfolio were out of scope of the report.

The evaluation report found:

- Institutional racism continues to exist at Wellcome, on account of "cultural, structural and leadership deficits across the organisation".
- Wellcome has not made sufficient progress against undertakings made in June 2020, and is perpetuating and exacerbating systemic racism within the wider research sector.
- Lack of diversity in senior leadership is an impediment to progress.
- Staff have experienced discrimination and harassment, with 25% of staff identifying as Black and people of colour agreeing or strongly agreeing they have been treated unfairly or

discriminated against due to an aspect of their identity. 20% of staff identifying as Black and people of colour experienced racist or classist comments targeted at them or regular microaggressions.

- Staff identifying as Black and people of colour are carrying the burden of creating change, with a heavy reliance on staff network groups.
- Two key outputs of Wellcome's anti-racism programme, an anti-racism toolkit and training, have so far failed to have a positive impact.
- Areas of positive practice within Wellcome highlighted in the report include in the funder's mental health team and its data for science and health team.
- The evaluation confirms feedback from staff and advisers, such as an external anti-racism expert advisory group appointed in November 2020, who resigned in March this year.

The evaluation acknowledges the pressures for Wellcome of the Covid-19 pandemic and a major staff restructure undertaken in this period, "both of which required significant allocation of organisational attention and resources".

### **Work since 2020**

The measures Wellcome is sharing today build on its [diversity, equity and inclusion strategy published by Wellcome in 2021](#) which set out 10-year goals on staffing, funding, and inclusive research design.

Earlier this year, Wellcome enhanced governance on inclusion issues with the creation of a new equity, diversity and inclusion subcommittee of its executive leadership team, with board oversight. Every leadership team member is preparing an action plan for addressing racial inequity in their areas of responsibility.

### **Julia Gillard, chair of Wellcome, said:**

"The actions we have announced today are fully supported by the board and are just the start of a renewed focus on anti-racism. They are meaningful actions which we believe will make a difference, but we can and will do much more.

A culture where everyone working at Wellcome, and with us, are treated equitably is vital to bring about rapid progress in science to tackle the urgent health challenges facing everyone."

The evaluation was conducted by The Social Investment Consultancy and The Better Org with advisory from Ngozi Cole, Lyn Cole Consultancy.

### **Tina Ajuonuma, founder and principal consultant at The Better Org said:**

"We are pleased to see Wellcome leadership's acceptance of our report and its decision to accept several recommendations immediately, and applaud the organisation's willingness to make the full report public and take accountability for taking restorative action in response to the report findings. We thank Wellcome staff and grantees who participated in this evaluation, particularly those for whom this process required an additional emotional and mental input. Anti-racism is a continual journey, which requires vulnerability, transparency, accountability and a commitment to changes to practice (and not just process). We wish Wellcome well on this journey, and look forward to seeing transformative changes to their internal operations, and their influence on the external global health funding landscape."

### **Notes to editors:**

- **Background on the evaluation:** The evaluation was conducted by The Social Investment Consultancy and The Better Org with advisory from Ngozi Cole, Lyn Cole Consultancy and was delivered to Wellcome in the last week of July. The consultants had access to a range of Wellcome policies. They conducted focus groups with a stratified random sample of staff and purposeful samples of staff involved in work on Wellcome's inclusive employer and inclusive funder strands of work. They surveyed Wellcome staff and grantees.
- The consultants recognised that an organisational restructure, an extended timeframe over which the evaluation was conducted, and low engagement from staff and grantees constituted limitations on their evaluation.
- Wellcome has written to all existing grant-holders, sharing the evaluation report and initial measures outlined to drive progress against anti-racism. {INSERT LINK}

**About Wellcome:** Wellcome is an independent charitable foundation which supports science to solve the urgent health challenges facing everyone. We support discovery research into life, health and wellbeing, and we're taking on three worldwide health challenges: mental health, infectious disease and climate and health.

### **Contact**

For media enquiries, please contact the Wellcome Media Office:

E: [media.office@wellcome.org](mailto:media.office@wellcome.org)

T: +44 (0)20 7611 8866

A copy of this press release will be published on Wellcome's website:

<https://wellcome.org/news/media-office>

-ENDS-

## Key information

- An external evaluation of our progress on becoming an anti-racist employer and funder is being shared with staff today. It has found that Wellcome is still an institutionally racist organisation, and that we have yet to act with the urgency required to tackle it.
- Jeremy and Julia, our Chair, and Ijeoma, one of our Governors, will share and discuss the findings at an all-staff meeting today at 12pm on the 6th floor. It will be live streamed. Please [see Trustnet for event details](#). There will be further meetings once staff have had more time to read the report.
- We will introduce a new post on ELT with responsibility for leading Wellcome's equity, diversity and inclusion work, and new measures to tackle inequity in our research funding
- The full report is available for you to read [here](#). We will be publishing it externally on Wednesday, August 10.

Dear colleagues,

Two years ago, Wellcome made a statement recognising that we have perpetuated racism, and made a commitment to becoming an [anti-racist organisation](#). We committed to three follow-up actions: the development of [an anti-racist toolkit and anti-racist principles](#), anti-racism training for our staff, and an external evaluation of our progress.

This evaluation of the Wellcome anti-racism programme has now reported. It has found that Wellcome is still an institutionally racist organisation, and that we have yet to act with the urgency required to tackle this.

The evaluation confirms what we have heard from you and from the anti-racism expert advisory group who resigned in March: that Wellcome has so far failed to meet our commitments to addressing racism, and that progress has been too slow. I accept this.

The evaluation report, which was commissioned by CEDI, reviews existing data that Wellcome has collected on race, and builds on this with focus groups and surveys of staff and grant-holders. It was conducted by The Social Impact Consultancy and The Better Org, with advisory from Ngozi Cole of Lyn Cole Consultancy.

By bringing together so much data and experience in one place, it provides a valuable point of focus for the issues we must address.

It includes some descriptions of unacceptable racist behaviours. I know that reading about these may be hurtful to those who have experienced them at Wellcome.

I am grateful for what you have told us, both through this evaluation and our broader anti-racism work, especially given the emotional burden involved. I am also grateful to the evaluation team. This lived experience provides insights that will advance and enhance our anti-racism work. Thank you.

I, and the Executive Leadership Team, am sorry for the actions and inactions that are behind this, and for their impact on you, all our colleagues, and our work.

We and the Board of Governors recognise that we have allowed institutional racism to continue at Wellcome. We will do better.



We are sharing the report within Wellcome today and we will be releasing it externally in full tomorrow to researchers, to other stakeholders and to the media. I realise that it is August, and many colleagues are away. After careful consideration with ELT and the Board, I have decided that it is right to publish now, so we can reflect on the findings and start work as soon as we can on our next steps. It is available here. I encourage you to read it.

Julia and I will convene a staff meeting today at 12 noon to discuss the report. We recognise that means most of you will not have had the opportunity to read the report before we meet, let alone to process it. We want to ensure there is an opportunity to come together today and open the floor to those of you who would like to speak. This will not be the only occasion for us to talk, or the only space for this – I will be hosting another meeting on Wednesday next week, and there will be other sessions to follow.

I know that the experiences that are described in these reports demonstrate the impact and pain caused, particularly for colleagues who are Black and people of colour. I also recognise that for many of you, reading this report will trigger emotions such as anger, hurt and disappointment. For those who want to seek some support we will have specialist counsellors on site from today. This is in addition to existing support via the Employee Assistance Programme (Care First) and Plumm. Please [see Trustnet for further detail](#), as well as the [Wellbeing Trustnet page](#).

I am also today sharing some actions which speak to our determination and renewed commitment to do better. These have been informed by what we have heard directly from you, by the evaluation's recommendations, by our work with experts within and outside Wellcome, and by discussions with the Board.

These are additional to our recent [ELT commitments on anti-racism](#), and will not be our only actions: they are just a start. Implementing them will be a key priority of my final year at Wellcome, before my term comes to an end in September 2023.

I will appoint a new member of ELT reporting to me, with responsibility for leading Wellcome's equity, diversity and inclusion work, including our specific focus on anti-racism. The role will help us to fully embed inclusive practices across the organisation and its work. It does not alter the fact that each ELT member is responsible for acting on anti-racism and EDI more broadly: rather, a key purpose of the role is to support them, challenge them, and hold them to account, as a peer with specialist expertise and experience.

We will work through the detailed job description and responsibilities of this role over the coming weeks, taking internal and external advice about what will make it most effective. As our strategic ambitions have developed over the year, it has become clear to me that we cannot deliver our mission without this appointment.

Some of the most troubling elements of the evaluation, and from our wider listening to staff, have been those that detail how commonly people of colour who work at Wellcome are having to deal with microaggressions, and their destructive impact. I know this will not be a surprise to those of you who experience them. I also know that the term "microaggression" is misleading, as the actions it describes are not minor and the impact is often devastating – I am using the term here as it is the one used in the report.

We all have a responsibility to educate ourselves about the nature and effects of these microaggressions, so that we can create the truly zero tolerance approach to racism at work that we claim but have failed to fully implement so far. We will address this by upskilling everyone (starting with people who manage others) in identifying microaggressions, avoiding them, and understanding what action to take when they occur.

We will also act to address inequity in our research funding, introducing two new measures before I step down as Director of Wellcome in September 2023:

- A dedicated funding stream exclusively for Black and people of colour, targeted at the career stages where this will have the greatest benefits for diversity.
- A set of positive action principles applied to funding decision-making processes. These will ensure that when applications are similar in merit, we favour those which add to the diversity of the pool of people we support. We believe that a consistent and transparent approach to this will be important both to fairness and equity, and to encouraging a more diverse group of people to apply for our funding. We will be exploring how best to achieve this.

We will also set clear expectations that the institutions we fund should take action to increase the numbers of people of colour embarking on, remaining, and thriving, in their research careers.

Each of these actions is a recommendation of the evaluation that we can take forward with confidence right away. While some details of these measures are still to be determined, and I will take advice within Wellcome and beyond on these, I think it is important to share today that they will happen and be delivered in my time at Wellcome.

Following the listening we conducted this spring and summer we made some important changes to accountability and governance with the formation of an Equity, Diversity and Inclusion (EDI) subcommittee of ELT with Board oversight. This subcommittee will oversee and drive our work in response to the report. Every ELT member is also preparing an action plan for addressing racial inequity in their areas of responsibility, which will be published in the autumn. These plans will build on our [Diversity, Equity and Inclusion strategy](#), published internally in 2020 and externally in 2021, which sets out our goals for becoming a more inclusive employer and funder. We will respond to many of the remaining recommendations from the evaluation through the ELT action plans, and to all of them by the end of the year.

It is understandable that we all feel the need to do something when confronted with a report like this. And quick and visible solutions feel necessary and important. However, it is also important when addressing a problem as serious as racism to take a step back and acknowledge that real change requires planned and deliberate actions, which will take time to be felt. This means that while I want to move on these actions swiftly, I appreciate they won't necessarily lead to immediate change. Taking this slowly and deliberately does not mean I don't take it seriously. It means moving forward on the understanding that real change takes time.

The evaluation report notes that Wellcome Collection and both the Investments team and the investment portfolio were not in scope. Colleagues across the whole organisation were invited to participate in the anti-racism survey that is included in the report. While the report notes some areas of good practice, it is not an exhaustive list of the many areas of good practice we know exist across the organisation. That includes in our funding, in our approach to investing, and in Wellcome Collection where many colleagues have already taken steps to understand and embody what being anti-racist and anti-ableist means by taking part in an anti-racist and anti-ableist learning and unlearning programme.

Finally, I am making a personal commitment to serious tangible improvement in this work before I leave Wellcome next year, because I know anti-racism is core to who we are, and to the way we deliver our mission. We must reflect it in our behaviour, in our processes, and across all our work. I want everyone working at and with Wellcome to be treated equitably so they can thrive, progress and flourish as we work together to reach our mission.

Best wishes Jeremy

**From:** Jeremy Farrar  
**Sent:** Wed, 10 Aug 2022 11:30:05 +0000  
**To:** Collins, Francis (NIH/NHGRI) [E]  
**Subject:** [EXTERNAL] FW: Anti-Racism Evaluation  
**Attachments:** Wellcome Trust\_Media Release\_Anti-racism programme evaluation\_DRAFT.pdf, AR\_internal statement JF.docx

Francis

It gives me no pleasure to share this with you, but I knew you would want to see it. Please excuse the short note.

The note below is self- explanatory and the attachments are

- The internal statement
- The Press release
- The link to the report etc

We are sharing this in externally on Wednesday having shared it with staff at Wellcome on Tuesday.

As you can imagine this is extraordinarily difficult most importantly for those who have experienced the impact of this. But I do hope that by finally facing up to these issues, within Wellcome and thereby also in the external sector, we can help bring about the radical change that is urgently needed.

These are incredibly challenging issues to confront, but until one accepts we must confront them, and do so in an open, transparent way, we will make no real progress - no matter hard that is at every level when going through it. I'll share these message as examples from individuals outside Wellcome. It is messages like this which in tough times and on tough issues do make a difference. Of course there will be others, positive, neutral and negative - but with the regret, is also a determination to face up to the issue, without that racism will remain endemic, corrosive and pervasive, whether acknowledged or not.

“ This is the beginning of a difficult journey but you are making a difference which others will follow.”

“ Thank you for sharing this. It is a tough read and clearly there is a lot to do. I commend Wellcome for making this so open and for continuing to push for change whilst recognising how much still needs to be achieved. I would like to hear more and know that many other scientific organisations and funders have a lot to learn.”

“ Thank you for your full transparency in sharing the process, findings and path forward on this critically important matter. This report will not only help Wellcome, but it is an humble reminder of how we must all ensure we are prioritizing these principles and actions.”

<https://wellcome.org/news/update-wellcomes-anti-racism-programme>

With best wishes as always Jeremy

## **FINAL EMAIL TO EXTERNAL STAKEHOLDERS**

(grant holders and those who have signed up to our newsletter via our website)

### **Update on Wellcome's anti-racism programme**

Two years ago, Wellcome made a statement recognising that we have perpetuated racism, and made a commitment to becoming an anti-racist organisation. We committed to developing anti-racist principles and an anti-racist programme, and to an external evaluation of our progress.

This evaluation of our work to become an anti-racist funder and employer has now reported. It has found that Wellcome is still an institutionally racist organisation, and that we have yet to act on this with the urgency required. I am sharing this report with you today [add link from website]. Wellcome Collection, and our investments team and portfolio, were not in scope.

While the evaluation found some progress, such as improvements in the racial diversity of our workforce and some positive behavioural and practice shifts, it reached a clear conclusion that we continue to fall short of our commitment to anti-racism, both as a funder and as an employer.

As Director of Wellcome, I accept this. I apologise for the actions and inactions that have caused this, and for the pain and disappointment it has led to.

The evaluation includes some descriptions of unacceptable racist behaviours, and reading about these may be hurtful to those who have experienced them. This lived experience provides insights that will advance and enhance our anti-racism work.

I am grateful for the feedback that our grant-holders, our staff and our advisers have given us through this evaluation, and in our broader anti-racism work, especially given the emotional burden involved in providing it.

Today, I am announcing further actions to advance anti-racism, which speak to our determination to do better.

As a charitable foundation that will spend at least £16 billion over the next decade on science to solve the urgent health challenges facing everyone, we know that Wellcome has great power. We have done too little to use this power to counter racial inequity in research.

Our next actions in addressing inequity in our research funding will be to introduce two measures in the next year:

- A set of positive action principles applied to funding decision-making processes. These will ensure that when applications are similar in merit, we favour those which add to the diversity of the pool of people we support. We believe that a consistent and transparent approach to this will be important both to fairness and equity, and to encouraging a more diverse group of people to apply for our funding. We will be exploring how best to achieve this.
- A dedicated stream of funding available exclusively to researchers who are Black and people of colour, targeted at the career stages where this will have the greatest benefits for diversity.

We will be announcing more detail about each of these measures over the coming months, as we develop the mechanisms by which they will be implemented. If there are to be any changes to our application processes, we will advise grant seekers in advance.

We will also be setting clear expectations that the institutions we fund should take action to increase the numbers of people of colour embarking on and remaining in research careers. We know that we already work with many of you, and your institutions, on EDI and antiracism and we want those positive and constructive relationships to continue.

We are also announcing today that Wellcome will appoint a new member of the Executive Leadership Team, reporting to the Director, with responsibility for leading Wellcome's equity, diversity and inclusion work, including our specific focus on anti-racism. The role will help us to fully embed inclusive practices across the organisation and its work. It does not alter the responsibility of each ELT member to act on anti-racism and EDI more broadly: rather, a key purpose of the role is to support them, challenge them, and hold them to account, as a peer with specialist expertise and experience. As our strategic ambitions have developed over the year, it has become clear to me that we will not be successful in delivering them without this additional emphasis.

We have already made some important changes to governance and accountability for the anti-racism initiatives, through an equity, diversity and inclusion committee with a direct reporting line to the Board. This will build on our [Diversity, Equity and Inclusion strategy](#), published in 2021, which sets out our goals for becoming a more inclusive employer and funder.

Other actions include a programme to educate ourselves about the nature and impact of racist micro-aggressions, and equipping ourselves to challenge them, so that we can create the truly zero tolerance approach to racism we have long professed but have failed fully to implement. The term 'microaggressions' is misleading, as these acts are not minor and their impact is often devastating. I use the term here as it is used in the report.

Our work on anti-racism is core to who we are, and to the way we deliver our mission. We must reflect it in our behaviour, in our processes, and across all our work. We want everyone working at, and funded by, Wellcome to be treated equitably so they can thrive, progress and flourish as we work together to reach our mission.

If you need to speak to someone in relation to this news, you can contact me directly or Wellcome here: [research.update@wellcome.org](mailto:research.update@wellcome.org) or via your usual contact.

**Best wishes Jeremy**

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**DRAFT**

**Media Release**

**Immediate release: 1130 BST Wednesday 10<sup>th</sup> August**

**‘Insufficient progress’ on anti-racism at Wellcome, evaluation finds**

- Funder recognised in 2020 that it had perpetuated racism.
- Wellcome accepts evaluation finding that it has not done enough to address this and is still an institutionally racist organisation.
- Positive action principles to be applied to research funding decisions, so that when applications have similar merit Wellcome favours those which broaden diversity.
- Dedicated funding stream to be introduced for researchers who are Black and people of colour.
- New equity, diversity and inclusion role to be created at executive level.

An evaluation of progress on anti-racism work at Wellcome has found insufficient action on ambitions the funder set out two years ago.

In June 2020, Wellcome publicly recognised that it had perpetuated racism, acknowledging that there is structural racism within Wellcome and the wider research system.

Wellcome pledged to become an anti-racist organisation, with a programme of work including the creation of anti-racist principles and an anti-racist toolkit, anti-racism training for staff, and an external evaluation of progress as a research funder and employer.

This evaluation of Wellcome’s anti-racism programme has now reported [\[INSERT LINK\]](#) and was shared with staff on Tuesday. It finds that Wellcome is still an institutionally racist organisation.

While the evaluation finds “some positive behavioural and practice shifts” it reaches a clear conclusion that “there has been insufficient action taken to allow this commitment to take root”. It highlights evidence of microaggressions and other racist behaviours experienced by staff and grant-holders.

Wellcome is today announcing further anti-racism actions.

These include a firm commitment to apply positive action principles to funding decisions, so that when applications are of similar merit Wellcome will favour those which broaden the diversity of the pool of people it supports. This will come into effect by September 2023.

**Dr Jeremy Farrar, director of Wellcome said:**

“Wellcome is still doing too little to use its power and influence to counter racism. We have fallen short of commitments made to colleagues and to the research community. As a consequence of us not doing more and not acting sooner, Wellcome remains an institutionally racist organisation.

“Wellcome has played and continues to play a role in sustaining racism both in its own operations and in the wider research sector. I am sorry for the actions and inactions behind this, and the hurt and disappointment these have caused.

“It’s clear that unacceptable behaviour still exists at Wellcome. The leadership team, like so many of our colleagues at Wellcome, are determined to change this. We will do better.”

## New action on anti-racism

The new actions Wellcome is announcing to drive greater progress against anti-racism are:

- **Positive action principles** to be applied to Wellcome's funding decision-making process. These will ensure that when applications are similar in merit, Wellcome will favour those which add to the diversity of the pool of people it supports.
- **Dedicated funding stream** for researchers who are Black and people of colour, targeted at the career stages where this will have the greatest benefits for diversity.
- **New equity, diversity and inclusion role at executive-level**, reporting to the director, to lead on Wellcome's internal and external work on equity, diversity and inclusion, including a specific focus on anti-racism. This role will implement and extend Wellcome's existing diversity and inclusion strategy, launched in 2021, ensuring that it is embedded across the organisation and its work.

Each of these measures addresses key recommendations of the evaluation which Wellcome has agreed to accept and begin to implement as soon as possible. Detail about these approaches will be determined over the coming months, and all will be implemented by September 2023.

### Dr Farrar continued:

"Our existing approaches to grant funding are not delivering equity. We're now clear that we won't be successful in improving equity in our research funding, and thereby structural racism in the research sector, without taking positive action.

"The question remaining for us is not whether we do this, but the details of how we do it. We are now focusing on these implementation questions, engaging and listening to those with lived experience and to our partners in the sector as we do so.

"We recognise these measures will not be the only changes needed but I hope they speak to Wellcome's determination and renewed commitment to do better."

The evaluation report makes a number of additional recommendations that Wellcome will review against existing plans, and will respond to in the coming months.

Wellcome will also set clear expectations that the institutions it funds should take action to increase the numbers of people of colour embarking on, remaining and thriving in their research careers.

## Evaluation findings

The external evaluation draws on focus group interviews with staff and grant-holders, surveys, and a review of existing data Wellcome collected on race. Wellcome Collection, the free museum and library, and Wellcome's in-house investment team and portfolio were out of scope of the report.

The evaluation report found:

- Institutional racism continues to exist at Wellcome, on account of "cultural, structural and leadership deficits across the organisation".
- Wellcome has not made sufficient progress against undertakings made in June 2020, and is perpetuating and exacerbating systemic racism within the wider research sector.
- Lack of diversity in senior leadership is an impediment to progress.
- Staff have experienced discrimination and harassment, with 25% of staff identifying as Black and people of colour agreeing or strongly agreeing they have been treated unfairly or



discriminated against due to an aspect of their identity. 20% of staff identifying as Black and people of colour experienced racist or classist comments targeted at them or regular microaggressions.

- Staff identifying as Black and people of colour are carrying the burden of creating change, with a heavy reliance on staff network groups.
- Two key outputs of Wellcome's anti-racism programme, an anti-racism toolkit and training, have so far failed to have a positive impact.
- Areas of positive practice within Wellcome highlighted in the report include in the funder's mental health team and its data for science and health team.
- The evaluation confirms feedback from staff and advisers, such as an external anti-racism expert advisory group appointed in November 2020, who resigned in March this year.

The evaluation acknowledges the pressures for Wellcome of the Covid-19 pandemic and a major staff restructure undertaken in this period, "both of which required significant allocation of organisational attention and resources".

### **Work since 2020**

The measures Wellcome is sharing today build on its [diversity, equity and inclusion strategy published by Wellcome in 2021](#) which set out 10-year goals on staffing, funding, and inclusive research design.

Earlier this year, Wellcome enhanced governance on inclusion issues with the creation of a new equity, diversity and inclusion subcommittee of its executive leadership team, with board oversight. Every leadership team member is preparing an action plan for addressing racial inequity in their areas of responsibility.

### **Julia Gillard, chair of Wellcome, said:**

"The actions we have announced today are fully supported by the board and are just the start of a renewed focus on anti-racism. They are meaningful actions which we believe will make a difference, but we can and will do much more.

A culture where everyone working at Wellcome, and with us, are treated equitably is vital to bring about rapid progress in science to tackle the urgent health challenges facing everyone."

The evaluation was conducted by The Social Investment Consultancy and The Better Org with advisory from Ngozi Cole, Lyn Cole Consultancy.

### **Tina Ajuonuma, founder and principal consultant at The Better Org said:**

"We are pleased to see Wellcome leadership's acceptance of our report and its decision to accept several recommendations immediately, and applaud the organisation's willingness to make the full report public and take accountability for taking restorative action in response to the report findings. We thank Wellcome staff and grantees who participated in this evaluation, particularly those for whom this process required an additional emotional and mental input. Anti-racism is a continual journey, which requires vulnerability, transparency, accountability and a commitment to changes to practice (and not just process). We wish Wellcome well on this journey, and look forward to seeing transformative changes to their internal operations, and their influence on the external global health funding landscape."

### **Notes to editors:**

- **Background on the evaluation:** The evaluation was conducted by The Social Investment Consultancy and The Better Org with advisory from Ngozi Cole, Lyn Cole Consultancy and was delivered to Wellcome in the last week of July. The consultants had access to a range of Wellcome policies. They conducted focus groups with a stratified random sample of staff and purposeful samples of staff involved in work on Wellcome's inclusive employer and inclusive funder strands of work. They surveyed Wellcome staff and grantees.
- The consultants recognised that an organisational restructure, an extended timeframe over which the evaluation was conducted, and low engagement from staff and grantees constituted limitations on their evaluation.
- Wellcome has written to all existing grant-holders, sharing the evaluation report and initial measures outlined to drive progress against anti-racism. {INSERT LINK}

**About Wellcome:** Wellcome is an independent charitable foundation which supports science to solve the urgent health challenges facing everyone. We support discovery research into life, health and wellbeing, and we're taking on three worldwide health challenges: mental health, infectious disease and climate and health.

### **Contact**

For media enquiries, please contact the Wellcome Media Office:

E: [media.office@wellcome.org](mailto:media.office@wellcome.org)

T: +44 (0)20 7611 8866

A copy of this press release will be published on Wellcome's website:

<https://wellcome.org/news/media-office>

-ENDS-











**From:** Jeremy Farrar  
**Sent:** Sun, 31 Jul 2022 18:59:49 +0000  
**To:** Harold E. Varmus; Collins, Francis (NIH/NHGRI) [E]  
**Subject:** [EXTERNAL] Re: WHO Science Council and genomics

Quick update

I am speaking with Soumya this coming week.

We have the next HIROs on the 12<sup>th</sup> October. I can certainly reach out to some from say - (b)(4) before that in a note if you think needed before October.

Best wishes Jeremy

---

**From:** "Harold E. Varmus" <varmus@med.cornell.edu>  
**Date:** Monday, 25 July 2022 at 02:41  
**To:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>, Jeremy Farrar <J.Farrar@wellcome.org>  
**Subject:** WHO Science Council and genomics

Jeremy, this is not an orchestrated Sunday assault. Francis, thanks for reinforcing the message I happened to send to Jeremy this morning. I hope we can work out something to help the strapped WHO. Best, HV

---

**From:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>  
**Date:** Sunday, July 24, 2022 at 9:23 PM  
**To:** "J.Farrar@wellcome.org" <J.Farrar@wellcome.org>  
**Cc:** "Harold E. Varmus" <varmus@med.cornell.edu>  
**Subject:** [EXTERNAL] WHO Science Council and genomics

Hi Jeremy,

See message below and attachment from Harold (cc'd here). I assume you have seen the WHO report, which makes a number of recommendations I think we could all support with enthusiasm. But it seems any funding support for the next steps may require staff support that WHO can't provide.

I'm wondering what you would think, as HIROs chair, of putting out a call for assistance here? Of course this might be something that Wellcome would be directly in a position to help with? But I wonder if there might also be interest from the (b)(4)

(b)(4)

There's some obvious synergy here with our HIROs subgroup on African genomics, though the WHO effort aims to encompass the needs of all LMICs, not just sub-Saharan Africa.



Please let Harold and me know your thoughts.

Best, Francis

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**From:** Harold E. Varmus <varmus@med.cornell.edu>  
**Sent:** Monday, July 18, 2022 11:39 AM  
**To:** Collins, Francis (NIH/NHGRI) [E] <francis.collins@nih.gov>  
**Subject:** [EXTERNAL] RE: John Porter

Francis,

You may not have heard about the release of the WHO Science Council's report on genomics in Geneva last week. Since the release was embedded in Tedros' weekly report, it did not get much traction, so I have attached the final version.

It was apparent from our discussions with WHO officials, including Tedros and Soumya, that we'd have a much better chance of implementing the recommendations aimed at the WHO (and at others who listen to WHO) if a source of funds or experienced staff could be used for those purposes within Soumya's division. Do you think that HIROs might be helpful? Or anyone else? Having a couple of people working for WHO to put the Genomics Committee in place and to follow up on our recommendations in collaboration with other organizations (GA4GH, funding bodies, G2MC, H3Africa, etc etc) might make a very substantial difference. I am once again stunned by the lack of flexible resources at WHO.

Thanks for any suggestions you might have.

Harold

---

**From:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>  
**Date:** Wednesday, June 22, 2022 at 12:47 PM  
**To:** "Harold E. Varmus" <varmus@med.cornell.edu>  
**Subject:** [EXTERNAL] RE: John Porter

Hi Harold,

Great to see you also. Your reflective essay on John Porter is wonderful, and it's fine to include the mention of his support for the HGP.

Yes, let's keep in contact about WHO and HIROs efforts on genomics.

Looking forward here to Arti's arrival. All that's needed is Senate confirmation. What could go wrong?

Best, Francis

---

**From:** Harold E. Varmus <varmus@med.cornell.edu>  
**Sent:** Wednesday, June 22, 2022 11:55 AM

**To:** Collins, Francis (NIH/NHGRI) [E] <[francis.collins@nih.gov](mailto:francis.collins@nih.gov)>  
**Subject:** [EXTERNAL] John Porter

Francis,

Good to see you at the Porter event. I may have mentioned that Paul Goldberg asked me to write a personal account of John's work on behalf of the NIH. Since I mentioned in the attached piece your anecdote about his championing the HGP, I thought you should see it before it appears on Friday. If, for any reason, you'd like me to delete it, let me know.

I hope to be able to send you the WHO Genomics report soon and hope we can think about some ways to advance its objectives.

And, yes, good news about the OSTP nomination! Thanks for the advanced notice. Let's hope for a speedy confirmation.

Best, HV

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**From:** Jeremy Farrar  
**Sent:** Mon, 25 Jul 2022 06:58:16 +0000  
**To:** Harold E. Varmus; Collins, Francis (NIH/NHGRI) [E]  
**Subject:** [EXTERNAL] Re: WHO Science Council and genomics

Good to hear from you both. Emails below.

It is frustrating as you say, that WHO, its Chief Scientist, cannot get access to internal funds and as I am sure with you, we and many others then supplement a number of activities within WHO, with small project funding which adds to WHO's administrative burdens, is inefficient and often not sustained. Funding someone to be based in Geneva is also extraordinarily expensive!

I'll get in touch with Soumya today and make sure to put it on the agenda for the HIROs call, and circulate before then.

Best wishes Jeremy

**From:** "Harold E. Varmus" <varmus@med.cornell.edu>  
**Date:** Monday, 25 July 2022 at 02:41  
**To:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>, Jeremy Farrar <J.Farrar@wellcome.org>  
**Subject:** WHO Science Council and genomics

Jeremy, thanks for the quick response and on a Sunday!

The most immediate need, in my view, is a means to provide help for the follow up to our report—two salaries for knowledgeable staff, plus expenses to support meetings (largely virtual) for the Genomics Committee that we recommend. But the actual costs would be best discussed with Soumya and her secretariat.

I appreciate your thinking about this and so will my fellow Council members.

Best, HV

Sent from my iPad

On Jul 24, 2022, at 4:38 PM, Jeremy Farrar <[J.Farrar@wellcome.org](mailto:J.Farrar@wellcome.org)> wrote:

Thanks Harold – good to hear from you. Leave with me for a few days – do you have a sense of how much they are looking for? Best wishes Jeremy

**From:** "Harold E. Varmus" <varmus@med.cornell.edu>

**Date:** Sunday, 24 July 2022 at 17:07

**To:** Jeremy Farrar <J.Farrar@wellcome.org>

**Subject:** Genomics at WHO

Jeremy,

You may be aware that the new Science Council that I chair at WHO has recently released its first report (attached), which proposes a set of actions that could accelerate the global adoption of genomic technologies, especially in low- and middle-income countries. When the Council met in Geneva recently (in-person for the first time), we learned that the Science Directorate, headed by Soumya Swaminathan, lacks the fiscal resources required to carry out many of recommendations, especially the formation of an (b)(4) that would oversee and assist the actions we advocate.

I wonder if the Wellcome Trust---or other organizations affiliated with HIROs, which shares our aspirations---might consider a modest contribution (funds or seconded personnel) to help counter this deficiency. If there is any chance of that, I'd be happy to converse further by mail, phone, or Zoom to explore what might be done.

Thanks for thinking about this.

With best wishes,

Harold

---

**From:** "Harold E. Varmus" <varmus@med.cornell.edu>

**Date:** Monday, 25 July 2022 at 02:41

**To:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>, Jeremy Farrar <J.Farrar@wellcome.org>

**Subject:** WHO Science Council and genomics

Jeremy, this is not an orchestrated Sunday assault. Francis, thanks for reinforcing the message I happened to send to Jeremy this morning. I hope we can work out something to help the strapped WHO. Best, HV

---

**From:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>

**Date:** Sunday, July 24, 2022 at 9:23 PM

**To:** "J.Farrar@wellcome.org" <J.Farrar@wellcome.org>

**Cc:** "Harold E. Varmus" <varmus@med.cornell.edu>  
**Subject:** [EXTERNAL] WHO Science Council and genomics

Hi Jeremy,

See message below and attachment from Harold (cc'd here). I assume you have seen the WHO report, which makes a number of recommendations I think we could all support with enthusiasm. But it seems any funding support for the next steps may require staff support that WHO can't provide.

I'm wondering what you would think, as HIROs chair, of putting out a call for assistance here? Of course this might be something that Wellcome would be directly in a position to help with? But I wonder if there might also be interest from the (b)(4)

(b)(4)

There's some obvious synergy here with our HIROs subgroup on African genomics, though the WHO effort aims to encompass the needs of all LMICs, not just sub-Saharan Africa.

Please let Harold and me know your thoughts.

Best, Francis

---

**From:** Harold E. Varmus <varmus@med.cornell.edu>  
**Sent:** Monday, July 18, 2022 11:39 AM  
**To:** Collins, Francis (NIH/NHGRI) [E] <francis.collins@nih.gov>  
**Subject:** [EXTERNAL] RE: John Porter

Francis,

You may not have heard about the release of the WHO Science Council's report on genomics in Geneva last week. Since the release was embedded in Tedros' weekly report, it did not get much traction, so I have attached the final version.

It was apparent from our discussions with WHO officials, including Tedros and Soumya, that we'd have a much better chance of implementing the recommendations aimed at the WHO (and at others who listen to WHO) if a source of funds or experienced staff could be used for those purposes within Soumya's division. Do you think that HIROs might be helpful? Or anyone else? Having a couple of people working for WHO to put the Genomics Committee in place and to follow up on our recommendations in collaboration with other organizations (GA4GH, funding bodies, G2MC, H3Africa, etc etc) might make a very substantial difference. I am once again stunned by the lack of flexible resources at WHO.

Thanks for any suggestions you might have.

Harold

---

**From:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>  
**Date:** Wednesday, June 22, 2022 at 12:47 PM

**To:** "Harold E. Varmus" <[varmus@med.cornell.edu](mailto:varmus@med.cornell.edu)>

**Subject:** [EXTERNAL] RE: John Porter

Hi Harold,

Great to see you also. Your reflective essay on John Porter is wonderful, and it's fine to include the mention of his support for the HGP.

Yes, let's keep in contact about WHO and HIROs efforts on genomics.

Looking forward here to Arti's arrival. All that's needed is Senate confirmation. What could go wrong?

Best, Francis

---

**From:** Harold E. Varmus <[varmus@med.cornell.edu](mailto:varmus@med.cornell.edu)>

**Sent:** Wednesday, June 22, 2022 11:55 AM

**To:** Collins, Francis (NIH/NHGRI) [E] <[francis.collins@nih.gov](mailto:francis.collins@nih.gov)>

**Subject:** [EXTERNAL] John Porter

Francis,

Good to see you at the Porter event. I may have mentioned that Paul Goldberg asked me to write a personal account of John's work on behalf of the NIH. Since I mentioned in the attached piece your anecdote about his championing the HGP, I thought you should see it before it appears on Friday. If, for any reason, you'd like me to delete it, let me know.

I hope to be able to send you the WHO Genomics report soon and hope we can think about some ways to advance its objectives.

And, yes, good news about the OSTP nomination! Thanks for the advanced notice. Let's hope for a speedy confirmation.

Best, HV

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**From:** Jeremy Farrar  
**Sent:** Mon, 16 May 2022 06:40:21 +0000  
**To:** Collins, Francis (NIH/NHGRI) [E]  
**Cc:** Eiss, Robert (NIH/FIC) [E]; Glass, Roger (NIH/FIC) [E]; Tabak, Lawrence (NIH/OD) [E]  
**Subject:** [EXTERNAL] Re: HIROs and African genomics

Yes please do Francis – is there anything I can do to help? Best wishes Jeremy

---

**From:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>  
**Date:** Sunday, 15 May 2022 at 21:27  
**To:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Cc:** Robert Eiss <eissr@mail.nih.gov>, Roger Glass <glassr@mail.nih.gov>, "Tabak, Lawrence (NIH/OD) [E]" <lawrence.tabak@nih.gov>  
**Subject:** RE: HIROs and African genomics

Hi Jeremy,

(b)(4)

Best, Francis

---

**From:** Collins, Francis (NIH/NHGRI) [E]  
**Sent:** Wednesday, April 6, 2022 12:02 PM  
**To:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Cc:** Eiss, Robert (NIH/FIC) [E] <eissr@mail.nih.gov>; Glass, Roger (NIH/FIC) [E] <glassr@mail.nih.gov>; Tabak, Lawrence (NIH/OD) [E] <Lawrence.Tabak@nih.gov>  
**Subject:** HIROs and African genomics

Hi Jeremy,

It was a pleasure to see you at the British Ambassador's home last evening. I look forward to an opportunity to catch-up in more detail -- when our over-crowded schedules allow!

As I mentioned, the HIROs seemed highly supportive of moving forward with the (b)(4) plan. Importantly, that enthusiasm was shared by Glenda, Michael M, and Tom. For next steps, I would like to propose (b)(4)

(b)(4)

Though it might seem a little odd for me to help push this effort forward, since I am no longer an official HIROs member, I would be willing to do so – with lots of help from Rob Eiss. But I welcome your thoughts on how this ambitious effort might otherwise be staffed.

I will reach out to Harold Varmus to find out more about the WHO Science Council's upcoming report on genomics.

I believe it was Churchill that first coined the catchphrase "never let a crisis go to waste." The pandemic certainly has highlighted among African governments how critical it is to have genomics expertise in-country. The timing seems ripe for this African initiative.

I hope these thoughts align with your own thinking.

Best regards, Francis

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**From:** Jeremy Farrar  
**Sent:** Thu, 21 Apr 2022 07:34:14 +0000  
**To:** Collins, Francis (NIH/NHGRI) [E]; Ewan Birney  
**Cc:** Tabak, Lawrence (NIH/OD) [E]; Eiss, Robert (NIH/FIC) [E]; Glass, Roger (NIH/FIC) [E]  
**Subject:** [EXTERNAL] Re: HIROs 5 April 2022: Draft agenda, institutional updates reminder

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Francis  
Will you, or someone from your team be at the Bellagio Meeting next week?

Best wishes Jeremy

---

**From:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>  
**Date:** Wednesday, 16 March 2022 at 14:31  
**To:** Jeremy Farrar <J.Farrar@wellcome.org>, Ewan Birney <birney@ebi.ac.uk>  
**Cc:** "Tabak, Lawrence (NIH/OD) [E]" <lawrence.tabak@nih.gov>, Robert Eiss <eissr@mail.nih.gov>, Roger Glass <glassr@mail.nih.gov>  
**Subject:** RE: HIROs 5 April 2022: Draft agenda, institutional updates reminder

Hi Jeremy,

Thanks for clarification. But let's not be so careful that we avoid naming a very serious and ongoing problem (b)(4)

Francis

---

**From:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Sent:** Wednesday, March 16, 2022 10:14 AM  
**To:** Collins, Francis (NIH/NHGRI) [E] <francis.collins@nih.gov>; Ewan Birney <birney@ebi.ac.uk>  
**Cc:** Tabak, Lawrence (NIH/OD) [E] <lawrence.tabak@nih.gov>; Eiss, Robert (NIH/FIC) [E] <eissr@mail.nih.gov>; Glass, Roger (NIH/FIC) [E] <glassr@mail.nih.gov>  
**Subject:** [EXTERNAL] Re: HIROs 5 April 2022: Draft agenda, institutional updates reminder

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Francis  
I have been in touch with Ewan, as I mentioned (b)(6) and so Ewan has picked up the session

Ewan has replied, I copy him here and I hope Ewan and Irene if possible will help frame that discussion. Best wishes Jeremy

From Ewan

(b)(4)

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**From:** "Collins, Francis (NIH/NHGRI) [E]" <[francis.collins@nih.gov](mailto:francis.collins@nih.gov)>  
**Date:** Wednesday, 16 March 2022 at 00:01  
**To:** Jeremy Farrar <[J.Farrar@wellcome.org](mailto:J.Farrar@wellcome.org)>  
**Cc:** "Tabak, Lawrence (NIH/OD) [E]" <[lawrence.tabak@nih.gov](mailto:lawrence.tabak@nih.gov)>, Robert Eiss <[eissr@mail.nih.gov](mailto:eissr@mail.nih.gov)>, Roger Glass <[glassr@mail.nih.gov](mailto:glassr@mail.nih.gov)>  
**Subject:** HIROs 5 April 2022: Draft agenda, institutional updates reminder

Hey Jeremy,

I'm looking forward to the HIROs meeting on April 5 – I will join to (b)(4)  
(b)(4) but Larry Tabak will ably represent NIH.

I was a little puzzled, however, about item 3 on the agenda. From the October 1 meeting (minutes attached), I thought Irene was charged with (b)(4)  
(b)(4) That seems to have been substantially diverted in the way in which item 3 is now described. Perhaps there are good reasons – scientific or political – that this needs to be reframed, but I just thought I would flag it for you.

All the best, Francis

**From:** Jeremy Farrar  
**Sent:** Wed, 16 Mar 2022 07:33:38 +0000  
**To:** Collins, Francis (NIH/NHGRI) [E]  
**Cc:** Tabak, Lawrence (NIH/OD) [E]; Eiss, Robert (NIH/FIC) [E]; Glass, Roger (NIH/FIC) [E]  
**Subject:** [EXTERNAL] Re: HIROs 5 April 2022: Draft agenda, institutional updates reminder  
**Attachments:** HIROs 5 April 2022 Agenda v3.docx, HIROs minutes October 2021.docx

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Thanks Francis - let me check (b)(6) and we have not been able to be in touch with her. I don't think she is back yet and Ewan Birney has been leading that section for Irene - there maybe an issue with left and right hands ...!

On 16 Mar 2022, at 00:01, Collins, Francis (NIH/NHGRI) [E] <francis.collins@nih.gov> wrote:

Hey Jeremy,

I'm looking forward to the HIROs meeting on April 5 – I will join to (b)(4)  
(b)(4) but Larry Tabak will ably represent NIH.

I was a little puzzled, however, about item 3 on the agenda. From the October 1 meeting (minutes attached), I thought Irene was charged with (b)(4)  
(b)(4) That seems to have been substantially diverted in the way in which item 3 is now described. Perhaps there are good reasons – scientific or political – that this needs to be reframed, but I just thought I would flag it for you.

All the best, Francis

























**From:** Tabak, Lawrence (NIH/OD) [E]  
**Sent:** Tue, 8 Mar 2022 10:48:20 +0000  
**To:** Jeremy Farrar; Collins, Francis (NIH/NHGRI) [E]  
**Cc:** Eiss, Robert (NIH/FIC) [E]; Chao, Brittany (NIH/OD) [E]; Parker, Ashley (NIH/OD) [E]; Teresa Miller de Vega  
**Subject:** Re: [EXTERNAL] Re: Following up on pandemic-relevant database issues

Jeremy,

Next week is fine. I have cc'd Ayanna McManus who can coordinate a time on this end.

Ayanna, please include Francis, Rob Eiss, Brittany, and Ashley (if available).

thanks, and best wishes,  
Larry

---

**From:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Date:** Monday, March 7, 2022 at 4:30 PM  
**To:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>  
**Cc:** "Tabak, Lawrence (NIH/OD) [E]" <lawrence.tabak@nih.gov>, "Eiss, Robert (NIH/FIC) [E]" <eissr@mail.nih.gov>, "Chao, Brittany (NIH/OD) [E]" <brittany.chao@nih.gov>, "Parker, Ashley (NIH/OD) [E]" <ashley.parker@nih.gov>, Teresa Miller de Vega <T.MillerdeVega@wellcome.org>  
**Subject:** [EXTERNAL] Re: Following up on pandemic-relevant database issues

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That would be wonderful.....this week is frantic...Larry would next week work for you?

Francis – congratulations on the new role, no better person! Good to have a call when you have a space second!

Best wishes jeremy

---

**From:** "Collins, Francis (NIH/NHGRI) [E]" <francis.collins@nih.gov>  
**Date:** Monday, 7 March 2022 at 11:26  
**To:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Cc:** "Tabak, Lawrence (NIH/OD) [E]" <lawrence.tabak@nih.gov>, Robert Eiss <eissr@mail.nih.gov>, "Chao, Brittany (NIH/OD) [E]" <brittany.chao@nih.gov>, "Parker, Ashley (NIH/OD) [E]" <ashley.parker@nih.gov>  
**Subject:** Following up on pandemic-relevant database issues

Hi Jeremy,

A few months ago you sent around a detailed inventory of infectious disease databases supported by Wellcome, and suggested a meeting with NIH where we could work on harmonizing data access. We have now conducted a similar analysis, and would be glad to have that discussion. Acting NIH Director Larry Tabak, who you know from HIROs and other things, has organized the effort on our end, and would be glad to join in a Zoom call to discuss possible next steps. I will leave it to you and Larry to organize that.

I'm finding this unexpected new gig as the Acting Science Advisor to the President to be pretty intense – not quite how I thought I would be spending 2022, but glad to be able to help with the U.S. science agenda.

All the best, Francis

**From:** Jeremy Farrar  
**Sent:** Thu, 3 Feb 2022 13:43:53 +0000  
**To:** Collins, Francis (NIH/NHGRI) [E]  
**Subject:** [EXTERNAL] FW: Letter from Ranking Member James Comer, Ranking Member Steve Scalise, and Ranking Member Jim Jordan  
**Attachments:** Letter to Dr Farrar.pdf

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**From:** (b)(6)  
**Date:** Thursday, 3 February 2022 at 13:33  
**To:** Jeremy Farrar (b)(6)  
**Cc:** (b)(6)  
**Subject:** Letter from Ranking Member James Comer, Ranking Member Steve Scalise, and Ranking Member Jim Jordan

Dr. Farrar,

Please see the attached letter from Congressman James Comer, Ranking Member of the House Committee on Oversight and Reform; Republican Whip Steve Scalise, Ranking Member of the Select Subcommittee on the Coronavirus Crisis; and Congressman Jim Jordan, Ranking Member of the House Committee on the Judiciary. We appreciate your assistance and look forward to hearing back from you. Please acknowledge receipt of this letter.

Thank you,

(b)(6)

(b)(6) Director of Operations  
Committee on Oversight and Reform | Ranking Member James Comer  
2105 Rayburn | Washington, DC 20515 (b)(6)

# Congress of the United States

Washington, DC 20515

February 3, 2022

Dr. Jeremy Farrar  
Director  
Wellcome  
215 Euston Rd.  
London NW1 2BE

Dear Dr. Farrar:

We are conducting oversight of the U.S. government's response to the ongoing COVID-19 pandemic, and specifically apparent conflicts of interest, suppression of scientific discourse, and abuse of official government resources. Documents in the custody of the National Institutes of Health (NIH) reveal how a group of scientists—including you—initially believed COVID-19 to be man-made before reversing course and claiming otherwise following discussions with senior government health officials. This sequence of events suggests a possible coordinated effort to conceal evidence pointing to a lab leak in Wuhan, China, and make your cooperation vital to our investigation. To restore public confidence in the scientific process regarding the origins of COVID-19, it is imperative you provide answers under oath about what, if any, underlying science changed in a matter of days after meeting with top government health officials.

On February 1, 2020, according to records, you took part in a teleconference with Dr. Francis Collins, Dr. Anthony Fauci, and other scientists.<sup>1</sup> Dr. Collins and Dr. Fauci were the only two U.S. officials on the call. Before, during, and after the call, some scientists expressed grave concerns that COVID-19 may have leaked out of the Wuhan Institute of Virology and that COVID-19 may have been partially engineered.<sup>2</sup> It is unclear whether Dr. Collins or Dr. Fauci ever relayed these serious concerns to policymakers through the proper chains of command. According to the NIH documents:

- On January 31, 2020, Dr. Kristian Andersen wrote in an email to Dr. Fauci and others: “The unusual features of the virus make up a really small part of the genome (<0.1%) so one has to look really closely at all the sequences to see that some of the features (potentially) look engineered . . . Eddie [Holmes], Bob [Garry], Mike [Farzan], and myself all find the genome inconsistent with expectations from evolutionary theory.”<sup>3</sup>

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<sup>1</sup> E-mail from Dr. Jeremy Farrar to Dr. Anthony Fauci, et. al. (Feb. 1, 2020) (On file with Comm. staff).

<sup>2</sup> Letter from Hon. James Comer, Ranking Member, H. Comm. on Oversight & Reform, and Hon. Jim Jordan, Ranking Member, H. Comm. on the Judiciary, to Hon. Xavier Becerra, Sec’y, U.S. Dep’t of Health & Human Services (Jan. 11, 2022).

<sup>3</sup> E-mail from Dr. Kristian Andersen to Dr. Anthony Fauci & Dr. Jeremy Farrar (Jan. 31, 2020) (On file with Comm. staff).

- On February 2, 2020, Dr. Robert Garry similarly wrote, “I really can’t think of a plausible natural scenario . . . I just can’t figure out how this gets accomplished in nature . . . Of course, in the lab it would be easy . . . .”<sup>4</sup>
- On February 2, 2020, Dr. Michael Farzan wrote he was “bothered by the furin site and ha[d] a hard time explain[ing] that as an event outside the lab . . . I am 70:30 or 60:40 [lab].”<sup>5</sup>
- On February 2, 2020, Dr. Andrew Rambaut stated, “From a (natural) evolutionary point of view the only thing here that strikes me as unusual is the furin cleavage site.”<sup>6</sup>
- On February 4, 2020, Dr. Edward Holmes indicated that he was “60-40 lab . . . .”<sup>7</sup>
- On February 4, 2020, you wrote, “I am 50-50 [lab].”<sup>8</sup>

Despite these private statements, you and the other scientists were later involved in the drafting and publication of a correspondence in *Nature Medicine* entitled, “The Proximal Origin of SARS-CoV-2” [hereinafter Proximal Origin].<sup>9</sup> Proximal Origin unequivocally stated a consensus view “that SARS-CoV-2 is not a laboratory construct or a purposefully manipulated virus.”<sup>10</sup> Proximal Origin was written by February 4, 2020, less than 48 hours after each of the authors privately expressed concern on the teleconference that COVID-19 originated in a lab.<sup>11</sup> It is unclear what scientific facts, if any, changed in that short amount of time. Newly released communications suggest that Dr. Collins hoped Proximal Origin would “put down” the hypothesis that COVID-19 originated in a lab and that Dr. Collins, in fact, wanted to do more to silence this debate.<sup>12</sup> Specifically, Dr. Collins wrote to Dr. Fauci: “I hoped [Proximal Origin] . . . would settle this . . . Anything more [NIH] can do?”<sup>13</sup> Dr. Collins’s question about what “more” NIH could do to “settle” the debate implies that he, Dr. Fauci, and the NIH were involved in an initial effort—i.e. Proximal Origin—to suppress dissent about the origins of COVID-19.

Alarming, it appears that the decision to suppress the lab-leak hypothesis was rooted in political calculations rather than scientific principles. NIH documents show that scientists on the February 1, 2020, teleconference pushed the natural evolution theory because they believed the

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<sup>4</sup> Letter from Hon. James Comer, *supra* note 2.

<sup>5</sup> *Id.*; “Furin” refers to COVID-19’s Furin Cleavage Site. Generally, Furin is a protease enzyme that breaks down proteins into single amino acids, to then form new proteins. This is done by cleaving bonds within specific proteins. COVID-19’s unique Furin Cleavage Site enhances transmissibility and ability to infect other tissue types in the body.

<sup>6</sup> *Id.*

<sup>7</sup> *Id.*

<sup>8</sup> *Id.*

<sup>9</sup> Dr. Kristian Andersen, et. al., *The proximal origin of SARS-CoV-2*, NATURE MEDICINE (Mar. 17, 2020).

<sup>10</sup> *Id.*

<sup>11</sup> E-mail from Dr. Edward Holmes to Dr. Jeremy Farrar (Feb. 4, 2020) (On file with Comm. staff).

<sup>12</sup> Letter from Hon. James Comer, *supra* note 2.

<sup>13</sup> *Id.*

lab-leak hypothesis could direct too much scrutiny toward China. For example, in one email, Dr. Collins claimed a lab-leak hypothesis would do “great potential harm to science and international harmony.”<sup>14</sup> Similarly, Dr. Ron Fouchier claimed a lab-leak hypothesis would do “unnecessary harm to science in general and science in China in particular.”<sup>15</sup> In fact, Dr. Garry later stated the consensus on the teleconference was “1. Don’t try to write a paper at all . . . or 2. If you do write it[,] don’t mention a lab origin as that will just add fuel to the conspiracists.”<sup>16</sup>

Proximal Origin was subsequently cited as scientific proof that COVID-19 did not originate in a lab in the now infamous letter in *The Lancet* entitled, “Statement in support of the scientists, public health professionals, and medical professionals of China combatting COVID-19.”<sup>17</sup> The scientific community, media, and Big Tech used *The Lancet* letter to censor and suppress all other hypotheses, going so far as to call the lab leak hypothesis a “conspiracy theory.”<sup>18</sup> Eventually, more than a year later, *The Lancet* published an addendum clarifying previously undisclosed monetary conflicts of interest.<sup>19</sup>

Transparency is a bedrock of scientific credibility. Continuing to shield the truth equates to hiding information that may inform future pandemic responses, advise the United States’ current national security posture, and restore confidence in our public health experts. We therefore request the following documents in your custody by February 17, 2022:

1. All drafts of “The Proximal Origins of SARS-CoV-2” between January 31, 2020, and March 17, 2020.
2. All documents and communications regarding the Wuhan Institute of Virology, EcoHealth Alliance, Inc., and the origins of COVID-19 between or among you and the following individuals:
  - a. Dr. Francis Collins;
  - b. Dr. Anthony Fauci; and
  - c. Dr. Lawrence Tabak.
3. All documents and communications regarding the convening of the February 1, 2020 teleconference.
4. All documents and communications resulting from the February 1, 2020 teleconference.

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<sup>14</sup> *Id.*

<sup>15</sup> *Id.*

<sup>16</sup> Maria Hibbett & Ryan Grim, *House Republicans Release Text of Redacted Fauci Emails on COVID Origins*, THE INTERCEPT (Jan. 12, 2022).

<sup>17</sup> Dr. Charles Calisher, et. al., *Statement in support of the scientists, public health professionals, and medical professionals of China combatting COVID-19*, THE LANCET (Feb. 19, 2020).

<sup>18</sup> *Id.*

<sup>19</sup> Editors of The Lancet, *Addendum: competing interests and the origins of SARS-CoV-2*, THE LANCET (June 21, 2021).

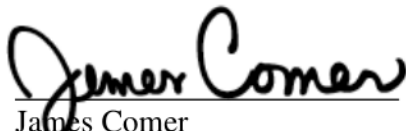
5. All documents and communications regarding the drafting and publication of “The Proximal Origins of SARS-CoV-2” subsequently published in *Nature Magazine*, between or among, but not limited to, the following individuals:
  - a. Dr. Francis Collins;
  - b. Dr. Anthony Fauci; and
  - c. Dr. Lawrence Tabak.

We also request that you appear for a voluntary transcribed interview with Committee staff no later than February 24, 2022. In addition, to allow a full and complete record of these documents to be produced to the Committee in response to future document requests, please:

1. Preserve all e-mail, electronic documents, and data (“electronic records”) created since December 31, 2019, related to requests (1) through (5) above. For the purposes of this request, “preserve” means taking reasonable steps to prevent the partial or full destruction, alteration, testing, deletion, shredding, incineration, wiping, relocation, migration, theft, or mutation of electronic records as well as negligent or intentional handling in a manner that would make such records incomplete or inaccessible;
2. Exercise reasonable efforts to identify and notify former employees and contractors, including subcontractors and consultants who may have access to such electronic records in an effort to ensure these records are to be preserved; and,
3. If it is the routine practice of any employee or contractor to destroy or otherwise alter such documents or electronic records, either halt such practices or arrange for the preservation of complete and accurate duplicates or copies of such records, suitable for production if requested.

The Committee on Oversight and Reform is the principal oversight committee of the U.S. House of Representatives and has broad authority to investigate “any matter” at “any time” under House Rule X. Thank you in advance for your cooperation with this inquiry.

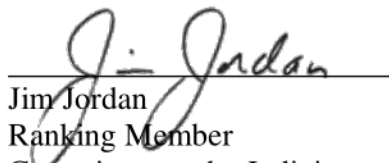
Sincerely,



James Comer  
Ranking Member  
Committee on Oversight and Reform



Steve Scalise  
Ranking Member  
Select Subcommittee on the  
Coronavirus Crisis



Jim Jordan  
Ranking Member  
Committee on the Judiciary

Dr. Jeremy Farrar

February 3, 2022

Page 5

cc: The Honorable Carolyn B. Maloney, Chairwoman  
Committee on Oversight and Reform

The Honorable James E. Clyburn, Chairman  
Select Subcommittee on the Coronavirus Crisis

The Honorable Jerrold L. Nadler, Chairman  
Committee on the Judiciary

The Honorable Xavier Becerra, Secretary  
U.S. Department of Health and Human Services

Dr. Lawrence Tabak, Acting Director  
U.S. National Institutes of Health



**From:** Collins, Francis (NIH/NHGRI) [E]  
**Sent:** Mon, 31 Jan 2022 18:10:24 +0000  
**To:** Jeremy Farrar  
**Cc:** Green, Eric (NIH/NHGRI) [E]  
**Subject:** RE: Wellcome Sanger Institute

Hi Jeremy,

Thanks for the heads up – and I have just seen the announcement from Mike.

I will have to agree with him that 12 years is a long time to lead a complex organization!

Best, Francis

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**From:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Sent:** Sunday, January 30, 2022 11:56 AM  
**To:** Collins, Francis (NIH/NHGRI) [E] <collinsf@od.nih.gov>; Green, Eric (NIH/NHGRI) [E] <egreen@nhgri.nih.gov>  
**Subject:** [EXTERNAL] Wellcome Sanger Institute

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Francis and Eric

I hope all is well.

Mike Stratton and I will host a (virtual) Townhall, at Wellcome Sanger Institute on Monday, when Mike will let everyone on Campus know of his intention to step down in 2022/2023 and to support the search and planning for his successor. A very important day for Mike and the Campus, as you would expect all very positive from Mike, but will be an emotional day for him and many others. We have been working together on the timing of this for the last few months, all of which has been very constructive. Best wishes Jeremy

This is his draft script, although it may change before Monday!

MRS:

- Thank you for joining me today. I have some news that I want to share with you all personally.
- Today I am announcing my intention to step down as Director of the Institute and as Chief Executive of the Wellcome Genome Campus.
- I have been Director for 12 years now and have previously indicated that I would like to take us through the 2020 Quinquennial review but then to step aside before the next one.

- The 2020 review has now been concluded with great aplomb, thanks to all of your efforts, and we have been successful in securing our next phase of funding from Wellcome. So, now is absolutely the right moment to start paving the way for the next Director to lead the Sanger Institute.
- Jeremy, GRL Board and Wellcome are of course aware of my decision and will start their search for the next Director over the next months with the expectation that the transition to the new Director will take place over the course of the next twelve months or so.
- After that I would like to continue conducting my own research here and participating in the life of our organisation, of course in discussion with the new Director.
- I am immensely proud of what we have accomplished together and am absolutely sure that the Sanger Institute will continue to fly high as a global leader in genome research, full of creative ideas, and an operational tour de force brimming with ambition and innovative solutions. We will have plenty of time to reflect and celebrate that over the next months.
- It is a great privilege for me to lead our organisation. However, today we start the process of looking for a new Director.
- I will hand over to Jeremy now

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**From:** collinscapstone - Collins, Francis (NIH/OD) [E]  
**Sent:** Tue, 4 Jan 2022 03:10:56 +0000  
**To:** Jeremy Farrar  
**Cc:** Tabak, Lawrence (NIH/OD) [E]  
**Subject:** RE: Infectious Disease Surveillance in the Wellcome Portfolio

Hi Jeremy,

I hope the New Year is off to a good start for you, despite the ongoing challenges of Omicron. My stepping down as NIH Director really did happen on December 19, though I confess it was a little chaotic over the final two weeks.

One of the efforts that I didn't carry as far as I had hoped is the infectious disease surveillance project that you and I had discussed, and that led to your generation of a very thorough Wellcome document. My colleagues and I reviewed it and were impressed – and a little overwhelmed – by the scope of the effort. This went well beyond COVID-19 and future pandemics to broader infectious disease issues, including TB, HIV, malaria, and AMR.

Dr. Larry Tabak, now the Acting Director of NIH, has been very engaged in our database and IT efforts. His plan is to see whether a similar inventory of NIH surveillance databases could be put together (which will be interesting in its own right). Following that, he'd like to explore possible collaborative efforts.

So stay tuned for a future outreach from Larry.

All best wishes,

Francis

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**From:** Jeremy Farrar <J.Farrar@wellcome.org>  
**Sent:** Monday, November 29, 2021 2:07 PM  
**To:** Collins, Francis (NIH/OD) [E] <collinsf@od.nih.gov>; Glass, Roger (NIH/FIC) [E] <glassr@mail.nih.gov>; Menetski, Joseph (FNIH) [T] <jmenetski@fnihi.org>; Wood, Gretchen (NIH/OD) [E] <woodgs@od.nih.gov>  
**Cc:** Connor Rochford <C.Rochford@wellcome.org>; Josie Golding <J.Golding@wellcome.org>; Edward Whiting <E.Whiting@wellcome.org>; Cheryl Moore <C.Moore@wellcome.org>; Gordon Dougan <G.Dougan@wellcome.org>; Audrey Duncanson <a.duncanson@wellcome.org>  
**Subject:** Infectious Disease Surveillance in the Wellcome Portfolio

Francis and colleagues

A short while ago I promised to share a (draft) document with some of the work within the Wellcome Portfolio which was linked with "Surveillance". It is not an easy thing to pull together but with many thanks to Audrey who you know well from H3Africa and other areas, Josie and others at Wellcome we

have pulled together an initial draft of what we have in our portfolio. We will inevitably have missed some things from this document, individual awards, or work that is linked but may not be in our systems as central to surveillance, however it certainly gives a starter of at least some, the majority of the work being done with our partners.

With all the discussion at G7, G20, in the WHO-Berlin-Hub and with many others on the need for enhanced global surveillance and sharing of data and samples it would be very useful for a sharing of an inventory of what we are all supporting. We will be in touch with others but wanted to share with you first following on from our earlier conversations and then see where there might be opportunities for further collaboration.

We look forward to following up on the earlier conversations. Diaries are very full, but would be great if we could get time before the festive break

with very best wishes Jeremy

Introductions on the Wellcome side  
Cheryl Moore – Director Research Programmes  
Ed Whiting – Director of Policy and Strategy  
Gordon Dougan – Director Infectious Disease  
Josie Golding – Research Lead Epidemics  
Audrey Duncanson.- Senior Research Manager Epidemics  
Connor Rochford – Consultant Research Programmes

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